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Fill in this information to identify your c		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your	Mark	
	government-issued picture identification (for example,	First Name A.	First Name
	your driver's license or passport).	Middle Name	Middle Name
		Lipscomb	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of		
	your Social Security	$xxx - xx - \underline{5} \underline{1} \underline{3} \underline{5}$	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Deb	otor 1	Mark A. Lipscomb			Case r	number (if known)		
			About Deb	otor 1:	Α	bout Debtor 2 (Sp	oouse Only in a Joi	nt Case):
4.	and Em	siness names ployer cation Numbers	☑ I have	e not used any business names or EIN	Ns. [I have not used	d any business nam	es or EINs.
	(EIN) yo	(EIN) you have used in the last 8 years		me	— <u>Б</u>	usiness name		
	Include	trade names and	Business na	me	В	usiness name		
	doing b	usiness as names	Business na	me		usiness name		
					E	<u></u>		
			<u></u>	·	E	<u></u>		
5.	Where	ou live			lf	Debtor 2 lives at	a different address	s:
			717 E. 89	th Place Street	– N	umber Street		
			Chicago	IL 60619				
			City	State ZIP Code	_ <u>c</u>	ity	State ZIP (Code
			Cook County		_ <u>c</u>	ounty		
			the one ab	iling address is different from bove, fill it in here. Note that the end any notices to you at this dress.	fr w	om yours, fill it in	ng address is differ n here. Note that the s to you at this maili	court
			Number \$	Street	– N	umber Street		
			P.O. Box		- <u>P</u>	.O. Box		
			City	State ZIP Code	<u>C</u>	ity	State ZIP 0	Code
6.		u are choosing	Check one	:	C	Check one:		
	this dis bankru	trict to file for otcy	petitic	the last 180 days before filing this on, I have lived in this district longer on any other district.			80 days before filing lived in this district er district.	
				e another reason. Explain. 28 U.S.C. § 1408.)		I have another (See 28 U.S.C	reason. Explain. . § 1408.)	
Р	art 2:	Tell the Court Ab	out Your B	Bankruptcy Case				
7.	Bankru	apter of the ptcy Code you		(For a brief description of each, see Note of the top o				ividuals Filing
	are cho under	osing to file	☐ Chapte	r 7				
			☐ Chapte	r 11				
			☐ Chapte	r 12				
			Chapte	r 13				

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Deb	otor 1 Mark A. Lipscor	nb		Case number (if known)	
8.	How you will pay the fee	co pa	will pay the entire fee when I file burt for more details about how you ay with cash, cashier's check, or me ehalf, your attorney may pay with a	may pay. Typically, if you are pa oney order. If your attorney is sub	ying the fee yourself, you may mitting your payment on your
			need to pay the fee in installment dividuals to Pay The Filing Fee in l		and attach the Application for
		B th fe	request that my fee be waived (Y y law, a judge may, but is not requinan 150% of the official poverty lines in installments). If you choose the ling Fee Waived (Official Form 103)	red to, waive your fee, and may do that applies to your family size ar his option, you must fill out the App	o so only if your income is less and you are unable to pay the
9.	Have you filed for	□ N	0		
	bankruptcy within the last 8 years?	☑ Y	es.		
		District	N.D. III.; Ch. 13	When <u>02/04/2015</u> MM / DD / YYYY	Case number <u>15-03693</u>
		District	N.D. III.; Ch. 13	When 09/12/2014 MM / DD / YYYY	Case number 14-33344
		District	N.D. III.; Ch. 13	When 05/24/2016 MM / DD / YYYY	Case number 16-17388
10.	Are any bankruptcy	☑ N	0		
	cases pending or being filed by a spouse who is	□ Y	es.		
	not filing this case with you, or by a business	Debtor		Relations	hip to you
	partner, or by an	District	t	When	Case number,
	affiliate?			MM / DD / YYYY	if known
		Debtor		Relations	nip to you
		District			Case number,
				MM / DD / YYYY	
11.	Do you rent your residence?	<u> </u>	o. Go to line 12. es. Has your landlord obtained ar	n eviction judgment against you?	
			No. Go to line 12.Yes. Fill out Initial States and file it as part of this I	ment About an Eviction Judgment pankruptcy petition.	Against You (Form 101A)

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Deb	otor 1 Mark A. Lipscomb				Case	number (if known) _		
Pa	art 3: Report About An	у Ві	usine	sses You Own as	a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of b	usiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number Street				
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Single Asset Rea	ness (as defined in 11 Il Estate (as defined in defined in 11 U.S.C. § er (as defined in 11 U.S	U.S.C. § 101(27A)) 11 U.S.C. § 101(51 101(53A))		ode
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	car mo:	set a _l st rece	filing under Chapter 11, opropriate deadlines. If nt balance sheet, staten f these documents do n	you indicate that you a nent of operations, cas	re a small business sh-flow statement, ar	debtor, you nd federal in	must attach your ncome tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under C	hapter 11.			
	For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am NOT a	small business deb	tor accordir	ng to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I am a sma	II business debtor ad	cording to t	the definition in the
Pa	art 4: Report If You Ov	vn o	r Hav	e Any Hazardous I	Property or Any F	Property That No	eds Imn	nediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed, why is it ne	eded?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property	Number Street			
					City		State	ZIP Code

Debtor 1 Mark A. Lipscomb Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:				
☐ Incapacity.	I have a mental illness or a men			

capacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1	Mark A. Lipscomb				Case number (if	know	n)	
Ρ	art 6:	Answer These Q	uest	ions for Reporting P	urpos	ses			
16. What kind of debts do you have?				16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.					
			16b		inves	iness debts? Business debt tment or through the operation		debts that you incurred to obtain e business or investment.	
			16c.	. State the type of debts y	ou ow	e that are not consumer or bus	siness	s debts.	
17.	Are you	u filing under r 7?	$\overline{\mathbf{V}}$	No. I am not filing unde	r Chap	oter 7. Go to line 18.			
	any exe exclude admini- are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution ecured creditors?		•	•	•	-	xempt property is excluded and to distribute to unsecured creditors?	
18.		any creditors do iimate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.		uch do you de your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.		uch do you e your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

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Debtor 1	Mark A. Lipscomb		Case number (if known)			
Part 7:	Sign Below					
For you		I have examined this petition, and I declared and correct.	are under penalty of perjury that the information provided is true			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		•	concealing property, or obtaining money or property by fraud in esult in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.			
		X /s/ Mark A. Lipscomb Mark A. Lipscomb, Debtor 1	X Signature of Debtor 2			
		Executed on 05/21/2018 MM / DD / YYYY	Executed on MM / DD / YYYY			

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Debtor 1	Mark A. Lipscomb		Case number (if know	n)			
represente	not represented by ey, you do not need	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.					
		X /s/ Robert J. Adams & Associates Signature of Attorney for Debtor	Date	05/21/2018 MM / DD / YYYY			
		Robert J. Adams & Associates Printed name Robert J Adams & Associates Firm Name 901 W Jackson Suite 202 Number Street					
		Chicago City	IL State	60607 ZIP Code			
		Contact phone (312) 346-0100	Email address bankr i	uptcy714@gmail.com			
		0013056 Bar number	IL State	_			

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Ē	ill in this inf	ormation to i	dentify your case	and this filing:		
D	ebtor 1	Mark	A.	Lipscomb		
		First Name	Middle Name	Last Name		
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
U	nited States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
	ase number				☐ Chaole	if this is an
(if	f known)				_	if this is an led filing
	ficial Form					
Sc	chedule A/	B: Propert	У			12/15
the filir she	asset in the cang together, bo	ategory where y th are equally re . On the top of a	ou think it fits best. B esponsible for supplyi any additional pages,	st an asset only once. If an a e as complete and accurate a ng correct information. If mo write your name and case nu ng, Land, or Other Real I	s possible. If two married per re space is needed, attach a mber (if known). Answer ever	eople are separate ery question.
						our interest in
1.	Do you own o		al or equitable interest	in any residence, building, la	nd, or similar property?	
	ب	nere is the proper	rty?			
2.		-	•	of your entries from Part 1, in ite that number here	_	\$0.00
Р	art 2: De	scribe Your \	/ehicles			
	-	-	-	n any vehicles, whether they a also report it on Schedule G: E.	_	-
3.	Cars, vans, tr	rucks, tractors,	sport utility vehicles, i	notorcycles		
	✓ No ☐ Yes					
4.	Examples: Bo			recreational vehicles, other v t, fishing vessels, snowmobiles		
	☑ No □ Yes					
5.		-	•	of your entries from Part 2, in ite that number here	_	\$0.00
Р	art 3: De	scribe Your F	Personal and Hous	sehold Items		
Do	you own or ha	ve any legal or o	equitable interest in a	ny of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	_	oods and furnis ajor appliances, f	hings furniture, linens, china,	kitchenware		
	□ No	.a. =				6440.00
	Yes. Des	cribe Four r	ooms of furniture o	t various ages		<u>\$140.00</u>

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Deb	tor 1	Mark A. Lipscomb	Case number (if known)
7.	Electroi Example	nics es: Televisions and radios; audio, video, stereo, and digital equipment; comusic collections; electronic devices including cell phones, cameras,	·
	□ No ☑ Yes	Describe Cell phone, 2 TVs, Laptop, Ipad, and other assort	red electronic devices \$440.00
8.		bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictu stamp, coin, or baseball card collections; other collections, memorabil	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	Describe	
9.		ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, canoes and kayaks; carpentry tools; musical instruments	pool tables, golf clubs, skis;
	✓ No ☐ Yes	Describe	
10.	•	ses: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes	Describe	
11.	Clothes Example	es: Everyday clothes, furs, leather coats, designer wear, shoes, accessor	ies
	☐ No ✓ Yes	Describe Clothing	\$200.00
12.	Jewelry Example	es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, gold, silver	heirloom jewelry, watches, gems,
	✓ No ☐ Yes	Describe	
13.		m animals es: Dogs, cats, birds, horses	
	✓ No ☐ Yes	Describe	
14.	did not	er personal and household items you did not already list, including a list	ny health aids you
		Give specific	
15.		dollar value of all of your entries from Part 3, including any entries for Part 3. Write the number here	. · · · · · · · · · · · · · · · · · · ·
Pa	art 4:	Describe Your Financial Assets	
Do y	ou own	or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you have in your wallet, in your home, in a safe deposit box, an petition	nd on hand when you file your
	✓ No ☐ Yes		Cash:

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Deb	tor 1 Mark A. Lipscomb	Case number (if known)	
17.		ner financial accounts; certificates of deposit; shares in credit unions, ther similar institutions. If you have multiple accounts with the same	
	No		
	▼ Yes	Institution name:	
	17.1. Checking account:	Checking account with PNC Bank	\$40.00
	17.2. Savings account:	Savings account with PNC Bank	\$0.00
18.	Bonds, mutual funds, or publicly t	raded stocks accounts with brokerage firms, money market accounts	
	✓ No ☐ Yes Institution	•	
19.	Non-publicly traded stock and inte an interest in an LLC, partnership,	rests in incorporated and unincorporated businesses, including and joint venture	
	✓ No Yes. Give specific information about them	f entity: % of ownership:	
20.	Government and corporate bonds Negotiable instruments include pers	and other negotiable and non-negotiable instruments onal checks, cashiers' checks, promissory notes, and money orders. e you cannot transfer to someone by signing or delivering them.	
	No Yes. Give specific information about them Issuer n	ame:	
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, profit-sharing plans	Keogh, 401(k), 403(b), thrift savings accounts, or other pension or	
	✓ NoYes. List each account separately. Type of a	ccount: Institution name:	
22.		u have made so that you may continue service or use from a company ds, prepaid rent, public utilities (electric, gas, water), telecommunications	
	☑ No		
22	Yes	Institution name or individual:	
23.	No No	periodic payment of money to you, either for life or for a number of years)	
	Yes Issuer n	ame and description:	
24.	26 U.S.C. §§ 530(b)(1), 529A(b), and	n account in a qualified ABLE program, or under a qualified state tuition program.	
	✓ No ✓ Yes Institution	on name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)	
25.	_	s in property (other than anything listed in line 1), and rights or	
	✓ No Yes. Give specific information about them		

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Deb	tor 1 Mark A. Lipscomb	Case number (if known)
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensin ✓ №	
	Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, ✓ No ✓ Yes. Give specific	liquor licenses, professional licenses
	information about them	
Mor	ney or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	☑ No	
	Yes. Give specific information about them, including whether	Federal:
	you already filed the returns	State:
	and the tax years	Local:
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, mainter	nance, divorce settlement, property settlement
	✓ No ☐ Yes. Give specific information	Alimony:
		Maintenance:
		Support:
		Divorce settlement:
		Property settlement:
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick p compensation, Social Security benefits; unpaid loans you made to some	
	✓ No Yes. Give specific information	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); cred	it, homeowner's, or renter's insurance
	No Yes. Name the insurance company of each policy and list its value Company name: Be	eneficiary: Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance po entitled to receive property because someone has died	licy, or are currently
	✓ No✓ Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a Examples: Accidents, employment disputes, insurance claims, or rights to sue	a demand for payment
	☑ No	
	☐ Yes. Describe each claim	

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Deb	tor 1	Mark A. Lipscomb	Case number (if known)	
34.		ontingent and unliquidated claims of every nature, including countercla o set off claims	aims of the debtor and	
	✓ No Yes	. Describe each claim		
35.	Any fina	ancial assets you did not already list		
	✓ No ☐ Yes	. Give specific information		
36.		dollar value of all of your entries from Part 4, including any entries for d for Part 4. Write that number here	_	\$40.00
Pá	art 5:	Describe Any Business-Related Property You Own or Have	e an Interest In. List any	real estate in Part 1.
37.	Do you	own or have any legal or equitable interest in any business-related pro	perty?	
		Go to Part 6 Go to line 38.		
	_			Current value of the
				portion you own? Do not deduct secured
				claims or exemptions.
38.		ts receivable or commissions you already earned		
	✓ No ☐ Yes	. Describe		
39.		equipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fax m desks, chairs, electronic devices	nachines, rugs, telephones,	
	✓ No ☐ Yes	. Describe		
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of you	ır trade	
	✓ No ☐ Yes	. Describe		
41.	Invento	ry		
	✓ No ☐ Yes	. Describe		
42.	Interest	s in partnerships or joint ventures		
	✓ No ☐ Yes	. Describe Name of entity:	% of ownership:	
43.	Custom	ner lists, mailing lists, or other compilations		
	✓ No ☐ Yes	. Do your lists include personally identifiable information (as defined in No Yes. Describe	n 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	. Give specific information.		
45.		edollar value of all of your entries from Part 5, including any entries for d for Part 5. Write that number here	pages you have	\$0.00

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Deb	otor 1	Mark A. Lipscomb Case	e number (if known)	
P		Describe Any Farm- and Commercial Fishing-Related Property If you own or have an interest in farmland, list it in Part 1.	/ You Own or Have a	n Interest In.
46.	Do you	u own or have any legal or equitable interest in any farm- or commercial fishi	ng-related property?	
	_	o. Go to Part 7. es. Go to line 47.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a	animals oles: Livestock, poultry, farm-raised fish		
	✓ No			
/Ω	_	either growing or harvested		
40.	✓ No			
	Ye	rs. Give specific ormation		
49.	Farm a	and fishing equipment, implements, machinery, fixtures, and tools of trade		
	✓ No ☐ Yes			
50.	Farm a	and fishing supplies, chemicals, and feed		
	✓ No			
51.	Any fa	rm- and commercial fishing-related property you did not already list		
	_	es. Give specific ormation		
52.		ne dollar value of all of your entries from Part 6, including any entries for page ed for Part 6. Write that number here	_	\$0.00
P	art 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above	
53.	-	u have other property of any kind you did not already list? bles: Season tickets, country club membership		
	✓ No ☐ Yes	es. Give specific information.	_	
54.	Add th	ne dollar value of all of your entries from Part 7. Write that number here		\$0.00

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Debtor 1	Mark A. Lipscomb	Case nu	umber (if known)		
Part 8:	List the Totals of Each Part of this Form				
55. Part 1	: Total real estate, line 2				\$0.00
56. Part 2	: Total vehicles, line 5	\$0.00			
57. Part 3	: Total personal and household items, line 15	\$780.00			
58. Part 4	: Total financial assets, line 36	\$40.00			
59. Part 5	: Total business-related property, line 45	\$0.00			
60. Part 6	: Total farm- and fishing-related property, line 52	\$0.00			
61. Part 7	: Total other property not listed, line 54	÷ \$0.00			
62. Total	personal property. Add lines 56 through 61	\$820.00	Copy personal property total	+	\$820.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62				\$820.00

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Fill in this inf	formation to	identify your	case:			
Debtor 1	Mark	A.	Lipscoml	b		
Debtor 2	First Name	Middle Name	e Last Name			
(Spouse, if filing)		Middle Name				
United States Ba	inkruptcy Court fo	or the: NORTHE	RN DISTRICT OF I	LLIN	IOIS	☐ Check if this is an
Case number (if known)						amended filing
Official Form						
Schedule C	: The Prop	erty You Cl	aim as Exemp	t		04/16
Using the property	you listed on So	thedule A/B: Prop to this page as m	perty (Official Form 106	SA/B)	as your source, list th	esponsible for supplying correct information. e property that you claim as exempt. If more essary. On the top of any additional pages,
is to state a speci exempted up to the receive certain be exemption of 100° property is deterr	ific dollar amoun ne amount of an enefits, and tax- % of fair market nined to exceed	nt as exempt. Al y applicable state exempt retireme value under a la that amount, yo	Iternatively, you may tutory limit. Some ex nt fundsmay be unli aw that limits the exe	clair emp imite mpti	n the full fair market tionssuch as those d in dollar amount. I	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount.
	-		•			
,,	exemptions are	-	•		if your spouse is filing	with you.
الكا	-		kruptcy exemptions. J.S.C. § 522(b)(2)	11 U.	S.C. § 522(b)(3)	
_	-			npt. f	ill in the information	below.
Brief description Schedule A/B tha	of the property	and line on	Current value of the portion you	Am	ount of the mption you claim	Specific laws that allow exemption
			own Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description:			\$140.00	☑	\$140.00	735 ILCS 5/12-1001(b)
Four rooms of f	urniture of var	ious ages			100% of fair market	. ,
Line from Schedul	e A/B: 6	-			value, up to any applicable statutory limit	
Brief description:		ıd, and other	\$440.00	\square	\$440.00 100% of fair market	735 ILCS 5/12-1001(b)
assorted electrons Line from Schedul		-			value, up to any applicable statutory limit	
-	_	•	more than \$160,3753 years after that for cas		ed on or after the date	of adjustment.)

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Debtor 1	Mark A. Lipscomb		Case number	r (if known)
Part 2:	Additional Page			
	ription of the property and line on 4/B that lists this property	Current value of the portion you own	 ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	eck only one box for h exemption	
Brief descri Clothing Line from S	ption: Schedule A/B: 11	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
•	ption: account with PNC Bank schedule A/B:17.1	<u>\$40.00</u>	\$40.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
_	ption: account with PNC Bank acchedule A/B: 17.2	\$0.00	\$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

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A. Lipscomb Middle Name Last Name Middle Name Last Name the: NORTHERN DISTRICT OF ILLING Secured Samples and Case number (if known is needed, copy the Additional Page, fill write your name and case number (if known is needed). Secured by your property? Secured by your property?	by Property together, both are equal Il it out, number the entri	es, and attach it to thi	12/15 plying is form.
Middle Name Last Name The: NORTHERN DISTRICT OF ILLING Who Have Claims Secured ssible. If two married people are filing to is needed, copy the Additional Page, fill write your name and case number (if know the secured by your property? In this form to the court with your other station below. Claims editor has more than one secured for each claim. If more than one	by Property together, both are equal il it out, number the entri nown). schedules. You have noth	amended filing ly responsible for sup ies, and attach it to this ning else to report on the Column B Value of collateral that supports this	12/15 pplying is form. Column C Unsecured portion
Who Have Claims Secured ssible. If two married people are filing to is needed, copy the Additional Page, fill write your name and case number (if know the secured by your property? bomit this form to the court with your other station below. Claims editor has more than one secured for each claim. If more than one	by Property together, both are equal il it out, number the entri nown). schedules. You have noth	amended filing ly responsible for sup ies, and attach it to this ning else to report on the Column B Value of collateral that supports this	12/15 pplying is form. Column C Unsecured portion
Ssible. If two married people are filing to is needed, copy the Additional Page, fill write your name and case number (if know secured by your property? Domit this form to the court with your other station below. Claims editor has more than one secured for each claim. If more than one	by Property together, both are equal il it out, number the entri nown). schedules. You have noth	amended filing ly responsible for sup ies, and attach it to this ning else to report on the Column B Value of collateral that supports this	12/15 pplying is form. Column C Unsecured portion
Ssible. If two married people are filing to is needed, copy the Additional Page, fill write your name and case number (if know secured by your property? Domit this form to the court with your other station below. Claims editor has more than one secured for each claim. If more than one	by Property together, both are equal il it out, number the entri nown). schedules. You have noth	amended filing ly responsible for sup ies, and attach it to this ning else to report on the Column B Value of collateral that supports this	12/15 pplying is form. Column C Unsecured portion
ssible. If two married people are filing to is needed, copy the Additional Page, fill write your name and case number (if known the court with your other station below. Claims editor has more than one secured for each claim. If more than one	together, both are equal il it out, number the entri nown). schedules. You have noth Column A Amount of claim Do not deduct the	amended filing ly responsible for sup ies, and attach it to this ning else to report on the Column B Value of collateral that supports this	12/15 pplying is form. Column C Unsecured portion
ssible. If two married people are filing to is needed, copy the Additional Page, fill write your name and case number (if known the court with your other station below. Claims editor has more than one secured for each claim. If more than one	together, both are equal il it out, number the entri nown). schedules. You have noth Column A Amount of claim Do not deduct the	ning else to report on the Column B Value of collateral that supports this	oplying is form. Column C Unsecured portion
ssible. If two married people are filing to is needed, copy the Additional Page, fill write your name and case number (if known the court with your other station below. Claims editor has more than one secured for each claim. If more than one	together, both are equal il it out, number the entri nown). schedules. You have noth Column A Amount of claim Do not deduct the	ning else to report on the Column B Value of collateral that supports this	oplying is form. Column C Unsecured portion
is needed, copy the Additional Page, fill write your name and case number (if known the court with your other station below. Claims editor has more than one secured for each claim. If more than one	Il it out, number the entrinown). schedules. You have noth Column A Amount of claim Do not deduct the	ning else to report on the Column B Value of collateral that supports this	is form. Column C Unsecured portion
claims editor has more than one secured for each claim. If more than one	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
for each claim. If more than one	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
in alphabetical order according to the			
Describe the property that secures the claim:	\$840.00	\$840.00	
—— Personal Property			
As of the date you file, the claim Contingent Unliquidated Disputed Nature of lien. Check all that app An agreement you made (such	ply.	car loan)	
_			
nother 📛 🔾 💢 💮 🖰 🕳 💮 💮 🕳 💮 💮 💮 💮 💮 💮 💮 💮 💮 💮 💮 💮 💮	<i>с.)</i>		
nother —			
	An agreement you made (suc ✓ Statutory lien (such as tax lier ✓ Judgment lien from a lawsuit ✓ Other (including a right to offs	☐ An agreement you made (such as mortgage or secured ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	□ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) ■ Taxes

Add the dollar value of your entries in Column A on this page. Write that number here:

\$840.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$840.00

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				1		
Fill in this in	formation to id	dentify your c	ase:			
Debtor 1	Mark First Name	A. Middle Name	Lipscomb Last Name			
	Filst Name	wilddie Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
(Spouse, it filling)) Tilotivallie	Middle Name	Last Name			
United States Ba	ankruptcy Court for	the: NORTHER	N DISTRICT OF ILLINOIS			
Case number				_	1 Observit 45:5:5:5	
(if known)				_	Check if this is a amended filing	an
Official Form	1065/5			J	J	
Official Form	-					
Schedule E	/F: Creditor	s Who Hav	e Unsecured Claims			12/15
Do not include an If more space is r to this page. On	ny creditors with needed, copy the the top of any ad	partially secured Part you need, fi ditional pages, w	and on Schedule G: Executory Co I claims that are listed in Schedule ill it out, number the entries in the vrite your name and case number (secured Claims	D: Creditors Who Hoboxes on the left. At	old Claims Secur	ed by Property.
	itors have priority					
	to Part 2.	diisecurea cian	ins against you!			
Yes.	to rait 2.					
claim. For ea show both pri more space is	ach claim listed, id ority and nonpriori	entify what type o ty amounts. As n ty unsecured clair	creditor has more than one priority uf claim it is. If a claim has both prior nuch as possible, list the claims in alms, fill out the Continuation Page of	ty and nonpriority amo	ounts, list that clain	m here and or's name. If
(For an expla	nation of each typ	e of claim, see the	e instructions for this form in the inst		- · ·	
				Total claim	Priority amount	Nonpriority amount
2.4				• • • • • • • •		
2.1				\$19,083.77	\$943.77	\$18,140.00
IRS Priority Creditor's Nan	ne		Last 4 digits of account number			
P.O Box 7346			When was the debt incurred?			
Number Street			As of the data you file the claim	in. Chack all that ann	- dv	
			As of the date you file, the claim Contingent	is. Check all that app	ny.	
Philadelphia	PA	19101-7346	Unliquidated			
City	State	ZIP Code	Disputed			
Who incurred the	debt? Check of	one.	Type of PRIORITY unsecured cla	im:		
Debtor 1 only Debtor 2 only			Domestic support obligations		1	
Debtor 1 and I	Debtor 2 only		Taxes and certain other debts Claims for death or personal ir	, ,	ent	
At least one of	f the debtors and a	another	intoxicated	,,		
—	claim is for a con	nmunity debt	Other. Specify			
Is the claim subje	ect to offset?					
✓ No Yes						
ш						

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Debtor 1 Mark A.	Lipscomb	Cas	e number (if known)		
Part 1: Your I	PRIORITY Unsecured (Claims Continuation Page			
After listing any entric previous page.	es on this page, number the	m sequentially from the	Total claim	Priority amount	Nonpriority amount
2.2			\$3,690.00	\$3,690.00	\$0.00
Robert J Adams &	Associates	Last 4 digits of account number			
Priority Creditor's Name 901 W Jackson, Su	ite 202	_	 J/23/2016		
Number Street		When was the dept incurred: 04	123/2010		
		As of the date you file, the claim is:	Check all that appl	y.	
		_			
Chicago City	IL 60607 State ZIP Code	— ☐ Disputed			
Who incurred the deb		Type of PRIORITY unsecured claim			
Debtor 1 only		Domestic support obligations	•		
Debtor 2 only	O h	Taxes and certain other debts you	u owe the governme	nt	
Debtor 1 and Debt	or 2 only debtors and another	Claims for death or personal injur	y while you were		
—	n is for a community debt	intoxicated ✓ Other. Specify			
Is the claim subject to	•	Attorney fees for this case			
☑ No					
Yes					
2.3			\$21,000.00	\$21,000.00	\$0.00
Yolanda Wilson Lip	scomb			+=1,000.00	
Priority Creditor's Name		Last 4 digits of account number			
C/o IL State Disburs Number Street	sement Unit	When was the debt incurred?			
PO Box 5400		 As of the date you file, the claim is: 	Check all that anni-	v	
		Contingent	onook all that appl	, .	
Carol Stream	IL 60197-5400	Unliquidated			
City	State ZIP Code	— ☐ Disputed			
Who incurred the deb	t? Check one.	Type of PRIORITY unsecured claim	:		
Debtor 1 only Debtor 2 only		☑ Domestic support obligations			
Debtor 1 and Debt	or 2 only	Taxes and certain other debts you Claims for death or personal injur	ŭ	nt	
	debtors and another	intoxicated	y write you were		
Check if this clair	n is for a community debt	Other. Specify			
Is the claim subject to	offset?				
✓ No Yes					

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Debtor 1	Mark A. Lipscomb	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
4. List all	es I of your nonpriority unsecured claims dittor has more than one nonpriority unsectaim it is. Do not list claims already incli	Claims against you? Submit this form to the court with your other schedules. In the alphabetical order of the creditor who holds each claim. Boured claim, list the creditor separately for each claim. For each claim listed, identify wholded in Part 1. If more than one creditor holds a particular claim, list the other creditors insecured claims, fill out the Continuation Page of Part 2.	in
Bloomings City Who incurr Debtor Debtor At least	in Luther King Drv Street 517 ton IL 61702-3517 State ZIP Code ed the debt? Check one. 1 only		94.62
Is the claim No Yes 4.2 Americash Nonpriority Cr 7454 S. Ci Number Bedford P City Who incurr Debtor Debtor At least Check i	n Loans editor's Name cero Street Lark LL 60629 State ZIP Code ed the debt? Check one. 1 only		00.00

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Debtor 1 Mark A. Lipscomb	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.3		\$2,510.68
Bankcard Services	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO box 4477 Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent	
<u> </u>	Unliquidated	
Columbus GA 31902	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
	Credit Card	
Is the claim subject to offset? ✓ No		
Yes		
4.4		\$112.00
Carson Pirie Scott	Last 4 digits of account number	
Nonpriority Creditor's Name Retail Services	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 15521	Contingent	
	Unliquidated	
Wilimington DE 19850-5521	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.5		*
		\$303.00
CEP America- Illinois, P.C Nonpriority Creditor's Name	Last 4 digits of account number	
P.O Box 582663 Ste D-11	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	— ☐ Disputed	
Modesto CA 95358-0046	_ - _	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a congretion agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Collecting for -	
Is the claim subject to offset?		
☑ No □ Yes		
1 1 100		

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Debtor 1 Mark A. Lipscomb	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.6		\$13,000.00
City of Chicago	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
121 N. Lasalle Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Chicago IL 60602		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	parking tickets-non dischargeable	
✓ No ☐ Yes		
4.7		\$876.00
Comcast Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 3002	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Southeastern PA 19398	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Other	
Is the claim subject to offset? ✓ No ✓ Yes		
4.8		\$319.73
Comenity Bank/Carsons	Last 4 digits of account number	
Nonpriority Creditor's Name 3100 Easton Square	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	 ☐ Contingent ☐ Unliquidated ☐ Disputed 	
Columbus OH 43219		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Other	
No No		
☐ Yes		

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Debtor 1 Mark A. Lipscomb	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$570.26
Creditone Bank	Last 4 digits of account number	40.0.20
Nonpriority Creditor's Name PO Box 60500	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
City of Industry CA 91716-0500		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Credit Card	
✓ No ☐ Yes		
4.10		\$470.00
Dane County Circuit Clerk Nonpriority Creditor's Name	Last 4 digits of account number	
215 S Hamilton Street	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Maidson WI 53703	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Other	
Is the claim subject to offset? No		
Yes		
4.11		\$300.00
Dupage County Nonpriority Creditor's Name	Last 4 digits of account number	
505 N. County Rd.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Wheeten II 00407	Disputed	
Wheaton IL 60187 City State ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Parking Tickets	
Is the claim subject to offset?	-	
☑ No ☐ Yes		

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Debtor 1 Mark A. Lipscomb	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$381.00
First Premier Bank	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O.Box 5519 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Sioux Falls SD 57117-5519	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
✓ Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.13		\$75.00
Game stop	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Trident Asset Management Number Street	As of the date you file, the claim is: Check all that apply.	
53 Perimeter Ctr. E Ste 4	Contingent	
	Unliquidated	
Atlanta CA 20246	Disputed	
Atlanta GA 30346 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
✓ Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Ц	☑ Other. Specify	
Check if this claim is for a community debt	Other	
Is the claim subject to offset?		
☑ No □ Yes		
4.14		\$46.00
Global Payments Check Services	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
6215 W. Howard St. Number Street	As of the date you file, the claim is: Check all that apply.	
Transcri Circot	Contingent	
	Unliquidated	
Niles IL 60714	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collecting for -Chalet Wine Cheese	
Is the claim subject to offset?		
✓ No Yes		

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Debtor 1 Mark A. Lipscomb	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$661.00
Harris & Harris, LTD	Last 4 digits of account number	
Nonpriority Creditor's Name P.O.Box 5598	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Chicago IL 60680-5598 City State ZIP Code	_	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Other	
Is the claim subject to offset?		
✓ No Yes		
4.16		\$1,792.00
Home Depot/Citibank Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 6497	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Ciany Falls CD 57447	Disputed	
Sioux Falls SD 57117 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No ✓ Yes		
4.17		\$3,181.00
Illinois Department of Employment Securi	Last 4 digits of account number	
Nonpriority Creditor's Name 33 S. State	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
	— ☐ Disputed	
Chicago IL 60603 City State ZIP Code	— Time of MONDBIODITY improving delains	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Unemployment	
Is the claim subject to offset?		
✓ No		
☐ Yes		

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Debtor 1 Mark A. Lipscomb	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.18		\$214.00
Illinois State Tollway	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
2700 Ogden Ave Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Downers Grove IL 60515	· _	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☑ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Fines	
Is the claim subject to offset?	1 1100	
☑ No ☐ Yes		
4.19	Local Addition of a community would be	\$1,010.55
J B Jenkins & Associates Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	
1253 Paysphere Circle	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
Chicago IL 60674	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Other	
✓ No Yes		
4.20		* 400.00
Jewel Food Stores	Last 4 digits of account number	\$132.00
Nonpriority Creditor's Name	When was the debt incurred?	
P.O.Box 1488 Number Street	As of the date you file, the claim is: Check all that apply.	
- Greet	Contingent	
	Unliquidated	
Melrose Park IL 60160	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans Obligations origing out of a generation agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Check if this claim is for a community debt Is the claim subject to offset?	Other	
No No		
☐ Yes		

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Debtor 1 Mark A. Lipscomb	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$0.00
KCA Financial Services	Last 4 digits of account number	Ψ0.00
Nonpriority Creditor's Name	When was the debt incurred?	
628 North St. Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Geneva IL 60134	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Attorney for -	
Is the claim subject to offset?		
☑ No □ Yes		
4.22		\$188.89
Peoples Energy Nonpriority Creditor's Name	Last 4 digits of account number	
200 E. Randolph Dr.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	☐ Unliquidated ☐ Disputed	
Chicago IL 60687-6207 City State ZIP Code	—	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Utility	
Is the claim subject to offset?	Othicy	
✓ No		
Yes		
4.23		\$1,000.00
Portfolio Recovery	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
120 Corporate Blvd., Ste. 1 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Norfolk VA 23502	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Collecting for -	
Is the claim subject to offset?		
✓ No ☐ Yes		

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After listing any entries on this page, number them sequentially from the previous page. Active Issue I	After listing any entries on this page, number them sequentially from the previous page. 424 SKO Bremer American, Inc. State Color S	Debtor 1 Mark A. Lipscomb	Case number (if known)	
A 24 24 24 24 24 24 24 2	424 Sto Brenner American, Inc. Last 4 digits of account number Stock All that apply. Po Box 230 Deputed	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Last 4 digits of account number When was the debt incurred?	Skb Denner American, Inc. Last 4 digits of account number When was the debt incurred?		m sequentially from the	Total claim
SKO Brenner American, Inc. Last 4 digits of account number Number Smert Confingent Confinent Co	Skip Enroner American, Inc. Last 4 digits of account number	4.24		\$146.60
Montports State About	When was the debt incurred?	SKO Brenner American, Inc.	Last 4 digits of account number	Ψ140.00
Number Street PO Box 230 Contingent Uniquidated Disputed	Size PO Box 230	Nonpriority Creditor's Name		
Unliquidated Disputed Dispu	Uniquidated Disputed		As of the date you file, the claim is: Check all that apply.	
Disputed State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 3 and Debtor 3 only Debtor 4 in an Oebtor 5 only Debtor 4 in an Oebtor 5 only Debtor 5 only Debtor 6 one. Debtor 6 one. Debtor 6 one. Debtor 7 only Debtor 7 only Debtor 8 one of the debtors and another Debtor 8 one of the debtor 8 o	Disputed Ny	PO Box 230	—	
Type of NonPRIORITY unsecured claim:	Substitution Size Time			
Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1	Student loans Student loan			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Steel and Debtor 2 only Type of NoNPRIORITY unsecured claim: Student Loans Debtor 1 only PO Box 3680 Number Street St. Marry Medical Center Norpromy Creditor's Name Street Check one. Debtor 1 only Debtor 1 only Debtor 2 only Check if this claim is for a community debt St. Marry Medical Center Norpromy Creditor's Name Norpromy	Student loans Student loa		Type of NONPRIORITY unsecured claim:	
Cobletor 2 only	Debtor 2 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 8 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor	- Dalatan A and a		
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	Debtor 2 only		
Check if this claim is for a community debt is the claim subject to offset? A	Check if this claim is for a community debt is the claim subject to offset? Vos	—		
Is the claim subject to offset? No	Is the claim subject to offset? No			
Vicinity	Sepacety cash Sepacety cas	—	Collecting for -	
Speedy cash Nompriority Creditor's Name 3611 N Ridge Rd Number Street State Street Student loans Student loans	Speedy cash			
Speedy cash Last 4 digits of account number Survet When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Dispute	Speedy cash Last 4 digits of account number Street When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Dispute			
Speedy cash Last 4 digits of account number Survet When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Dispute	Speedy cash Last 4 digits of account number Street When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Dispute	4.25		\$0.404.00
Safe Number Street Str	Safe Number Street Str	<u></u>	Last 4 digits of account number	\$2,161.00
As of the date you file, the claim is: Check all that apply.	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Contingent Unliquidated Disputed Disputed	Contingent			
Wichita KS 67205-1214 City State ZIP Code Who incurred the debt? Check one. Student loans Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Year St. Mary Medical Center Nonpriority Creditor's Name PO Box 3603 Number Street IN 46321-0757 Who incurred the debt? Check one. State ZIP Code Contingent Unliquidated Disputed Student loans Who incurred the debt? Check one. State ZIP Code Contingent Unliquidated Disputed Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Payday loan \$0.00 \$	Wichita KS 67205-1214 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt st the claim subject to offset? □ Nonpriority Creditor's Name PO Box 3603 Number Street Munster IN 46321-0757 City State ZIP Code Who incurred the debt? Check one. □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Check if this claim is for a community debt st the claim subject to offset? □ Nonpriority Creditior's Name PO Box 3603 Number Street Munster IN 46321-0757 City State ZIP Code Who incurred the debt? Check one. □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 only Debtor 2 only □ De	Number Sueet	<u> </u>	
Wichita KS 67205-1214	Vichita KS 67205-1214 Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecu		Unliquidated	
City	Type of NONPRIORITY unsecured claim: State	Wichita KS 67205-1214	— Disputed	
Debtor 1 only	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Munster IN 46321-0757 City State ZiP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 file state is the claim subject to offset? Noor Noor Noor Noor Noor Noor Noor Noo	City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.26 St. Mary Medical Center Nonpriority Creditor's Name PO Box 3603 Number Street Munster IN 46321-0757 City State ZiP Code Who incurred the debt? Check one. Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other. Specify Payday loan \$0.00 \$	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.26 St. Mary Medical Center Nonpriority Creditor's Name PO Box 3603 Number Street Munster IN 46321-0757 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 do not be debtors and another Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	- Dalatan A and a		
Debts 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Payday loan \$0.00 St. Mary Medical Center Nonpriority Creditor's Name PO Box 3603 Number Street Munster IN 46321-0757 City State ZIP Code Who incurred the debt? Check one. Debts to pension or profit-sharing plans, and other similar debts Who incurred the debt? Check one. Debts to pension or profit-sharing plans, and other similar debts St. Mary Medical Center Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	<u>·</u>		
Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.26 St. Mary Medical Center Nonpriority Creditor's Name PO Box 3603 Number Street Munster IN 46321-0757 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Vinite Is the claim is community debt Payday loan \$0.00	Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.26 St. Mary Medical Center Nonpriority Creditor's Name PO Box 3603 Number Street Munster IN 46321-0757 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	—		
Is the claim subject to offset? No	Is the claim subject to offset? No			
No Yes	No Yes St. Mary Medical Center Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		Payday loan	
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St. Mary Medical Center Nonpriority Creditor's Name PO Box 3603 Number Street Munster IN 46321-0757 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another As 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	St. Mary Medical Center Nonpriority Creditor's Name PO Box 3603 Number Street Munster City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Medical			
Nonpriority Creditor's Name PO Box 3603 Number Street Munster IN 46321-0757 City State ZIP Code Who incurred the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Nend Total Residue (Contingent Unliquidated Disputed) Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	Nonpriority Creditor's Name PO Box 3603 Number Street Munster IN 46321-0757 City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical			\$0.00
Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Number Street Munster IN 46321-0757 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ✓ Check if this claim is for a community debt Is the claim subject to offset? ✓ No When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical			
Munster IN 46321-0757 City State ZIP Code Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ✓ Other Minimum And Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	Munster IN 46321-0757 City State ZIP Code Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☑ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ☑ No	PO Box 3603		
Munster IN 46321-0757 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ✓ Obstack one Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 least one of the debtors and another Type of NONPRIORITY unsecured claim: ✓ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ✓ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	Munster IN 46321-0757 City State ZIP Code Check one. Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No ✓ No Unliquidated Disputed Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Medical	Number Street	<u> </u>	
Munster City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ✓ Object of Nonpriority unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	Munster City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No ✓ No ✓ Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Medical			
City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ✓ Other Miles and Debtor 2 only Other. Specify Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify	City State ZIP Code Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical Type of NONPRIORITY unsecured claim: ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical	Munster IN 46221.0757	Disputed	
Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify	Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No		Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other. Specify	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	- Dalatan Araba		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Object 1 and Debtor 2 only □ Object 2 only □ Object 3 priority claims □ Object 4 this is a second of the debtors and another □ Object 4 this is a second of the debtors and another □ Object 5 only □ Object 7 only □ Object 7 only □ Object 8 only □ Object 8 only □ Object 9 only	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No			
At least one of the debtors and another Other. Specify	At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No			
	☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No			
	☑ No	☐ Check if this claim is for a community debt		
☑ NO	☐ Yes			

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Debtor 1 Mark A. Lipscomb	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.27		\$699.00
T-Mobile	Last 4 digits of account number	Ψ033.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 37380 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Albuquerque NM 87176	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	cell phone	
Is the claim subject to offset? No		
Yes		
4.28		\$0.00
TCF Bank Nonpriority Creditor's Name	Last 4 digits of account number	
800 Burr Ridge Parkway	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Burr Ridge IL 60521	Disputed	
Burr Ridge IL 60521 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Other	
Is the claim subject to offset?		
No No		
Yes		
4.29		\$2,519.43
Verizon	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 33056	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Saint Petersburg FL 33733		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Check if this claim is for a community debt	Utility	
Is the claim subject to offset? No		
Yes		

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Debtor 1 Mark A. Lipscomb	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.30		\$0.00
Village Imaging Professionals, LLC	Last 4 digits of account number	Ψ0.00
Nonpriority Creditor's Name	When was the debt incurred?	
9410 Compubill Drive Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Orland Park IL 60462 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Medical	
Is the claim subject to offset?		
✓ No Yes		
4.31		\$700.00
WILL COUNTY	Last 4 digits of account number	
Nonpriority Creditor's Name 14 W Jefferson	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
leiliet II 60426	Disputed	
Joiliet IL 60436 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	parking tickets-non dischargeable	
Is the claim subject to offset?		
✓ NO Yes		
4.32		\$0.00
WOW! Internet and Cable	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 5715	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
Carol Stream IL 60197 City State ZIP Code	Time of NONDDIODITY improvided eleim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	2	
No No		
☐ Yes		

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Debtor 1 Mark A. Lipscomb		Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing previous previou	ng any entries on this page, number the page.	m sequentially from the	Total claim \$1,734.62
Xfinity		Last 4 digits of account number	
Nonpriority C	Creditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor Debtor Debtor At lease Check Is the clair No	State ZIP Code Tred the debt? Check one. r 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and another of this claim is for a community debt m subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Utility	
Yes			

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Debtor 1	Mark A. Lips	scomb				Case	e number (if known)
Part 3:	List Othe	rs to Be	Notified Abou	ıt a Debt Tha	t You Alread	y Li	sted
For ex credit debts	cample, if a coll or in Parts 1 or that you listed	ection ag 2, then li in Parts	gency is trying to dist the collection a	collect from you gency here. Si itional creditors	for a debt you milarly, if you h	owe ave r	ebt that you already listed in Parts 1 or 2. to someone else, list the original more than one creditor for any of the have additional parties to be notified for
Attorney Name	General for III	inois		On which en	try in Part 1 or I	Part	2 did you list the original creditor?
Healthcar	e and Family	Service	s MRU	Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number 160 N. La	Street Salle St.			Child suppo	ort arrearage		Part 2: Creditors with Nonpriority Unsecured Claims
Chicago		IL	60601-3103	— — Last 4 digits	of account num	ber	
City		State	ZIP Code				
Dept. of J	ustice\ Tax Di	vision		On which en	try in Part 1 or I	Part :	2 did you list the original creditor?
Name P.O.Box 5	55			— Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number	Street			Taxes	. , ,	П	Part 2: Creditors with Nonpriority Unsecured Claims
				_	_		
Washingt	on	DC	20044	 Last 4 digits 	of account num	nber	
City		State	ZIP Code	_			
Illinois De	epartment of H	lealthca	re and	On which en	try in Part 1 or I	Part :	2 did you list the original creditor?
Name P.O.B ox				_			Part 1: Creditors with Priority Unsecured Claims
Number	Street			_ Child suppo	• ` `		Part 2: Creditors with Nonpriority Unsecured Claims
				_ ''		ш	Tart 2. Greaters with Northholity Gliscoured Glaims
Chicago			60664	 Last 4 digits 	of account num	ber	
Chicago City		IL State	60664 ZIP Code	_			
Illinois De	ept. of Healtho	are and	Family	On which en	try in Part 1 or I	Part	2 did you list the original creditor?
P.O. Box Number	5400 Street			Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims
	Jueet			_			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits	of account num	ber	
Carol Stre	eam	IL State	60197-5400 ZIP Code	_			
IRS Asso	c. Area Couns	el, SB/S	SE .	On which en	try in Part 1 or I	Part :	2 did you list the original creditor?
Name 200 W. Ac	dams, Ste. 230	00		 Line	of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number	Street			Taxes	· ' '/		Part 2: Creditors with Nonpriority Unsecured Claims
				_			
Chicago		IL	60606-5208	 Last 4 digits 	of account num	ber	_
City		State	ZIP Code	_			

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Mark A.	Lipscomb			Case number (if known)	
Part 3: List O	thers to B	e Notified Ab	out a Debt That You Alr	eady Listed Continuation Page	
Liou Law Firm			On which entry in Part	1 or Part 2 did you list the original creditor?	
Name 575 W. Madison, Su	uite 361		Line of (Check	one):	
Number Street	ante 30 i		Legal Fees		
				Part 2: Creditors with Nonpriority Unsecured Claims	
			Last 4 digits of account	number	
Chicago City	IL State	60661 ZIP Code			
City	State	ZIP Code			
Precision Recover	Analytics		On which entry in Part	1 or Part 2 did you list the original creditor?	
Name C/O Asset Recover	y Solution		Lineof (Check	one): Part 1: Creditors with Priority Unsecured Claims	
Number Street 2200 E Devon			Collecting for -	Part 2: Creditors with Nonpriority Unsecured Claims	
Suite 200				_	
		20040	— Last 4 digits of account number		
Des Plaines City	IL State	60018 ZIP Code			
US Attorney, Civil I	Division		On which entry in Part	1 or Part 2 did you list the original creditor?	
Name 219 S. Dearborn			Line of (Check	one):	
Number Street			Taxes	Part 2: Creditors with Nonpriority Unsecured Claims	
Chicago	IL	60604	Last 4 digits of account	number	
City	State	ZIP Code			
	_				
Yolanda Wilson Lip	scomb		On which entry in Part	1 or Part 2 did you list the original creditor?	
8920 S. Ada			Line of (Check	one):	
Number Street			Child support arreara	Part 2: Creditors with Nonpriority Unsecured Claims	
			—— Last 4 digits of accoun	number	
Chicago	<u>IL</u>	60620			
City	State	ZIP Code			

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Debtor 1 Mark	k A. Lipscomb	Case number (if known)
Part 4: Add	d the Amounts for Each Type of Unsecured Claim	· · · · · · · · · · · · · · · · · · ·

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$21,000.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$19,083.77
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$3,690.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$43,773.77
			Total claim	
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +	\$37,298.38
	6j.	Total. Add lines 6f through 6i.	6j.	\$37,298.38

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Fill in this information to identify your case:									
Debtor 1	ebtor 1 Mark First Name		Lipscomb Last Name						
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS									
Case number (if known)					Check if this is an amended filing				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Debtor 1						
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	Fill in this inf	ormation to i	dentify your case	:		
Debtor 2 (Spouse, if filing) First Name	Debtor 1					
(Spouse, if filing) First Name		First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number ((if known) Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes No In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D). Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use						
Case number (if known) Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use	(Spouse, if filing)	First Name	Middle Name	Last Name		
Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this bage. On the top of any Additional Pages, write your name and case number (if known). Answer every question. I. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use	United States Ba	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use	Case number					
Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Collumn 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use					—	
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106G). Use					amended ming	
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106G). Use						
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No	Official Form	106H				
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No	Schedule H	Your Cod	ebtors			
two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No						_
include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use	1. Do you have ☑ No ☐ Yes	any codebtors?	(If you are filing a jo	int case, do not list either spou	se as a codebtor.)	
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use						
No Yes In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use	☑ No. Go t	to line 3.				
person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use	□ No		rmer spouse, or legal e	quivalent live with you at the tir	me?	
	3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use					

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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G	ill in this inforn	nation to ide	entify your case:				
	Debtor 1	Mark	Α.	Lipscon	nb		
		First Name	Middle Name	Last Name		Che	eck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		— -	An amended filing
	United States Bank	ruptcy Court for	r the: NORTHERN	DISTRICT OF IL	LINOIS	🗆	A supplement showing postpetition
	Case number				<u> </u>		chapter 13 income as of the following date:
	(if known)						MM / DD / YYYY
_	fficial Form 10						
S	chedule I: Yo	ur Incom	9				12/15
res inc abo you	ponsible for suppl lude information al out your spouse. If ur name and case r	ying correct in bout your spo more space i	oformation. If you are use. If you are separ s needed, attach a se wn). Answer every c	e married and not ated and your spe parate sheet to th	filing join ouse is no	itly, and your ot filing with y	d Debtor 2), both are equally spouse is living with you, you, do not include information any additional pages, write
1.	Fill in your emplo	pyment		Debtor 1			Debtor 2 or non-filing spouse
	If you have more t	_	implement status				<u> </u>
	job, attach a sepa with information al		Employment status	✓ Employed☐ Not employ	ed		☐ Employed☐ Not employed
	additional employe	ers.	Occupation	Chef Manager	•		
	Include part-time, or self-employed v		Employer's name	Aramark Serv	ices, Inc		
	Occupation may in student or homem applies.	-	mployer's address	1101 Market S Number Street	Street		Number Street
				Philadelphia	PA	19107	
				City	Sta	te Zip Code	City State Zip Code
		H	low long employed t	nere? 2 years	6		
	Part 2: Give D	Details Abou	ıt Monthly Incom	e			
Es		ome as of the	date you file this form		ning to rep	ort for any line	e, write \$0 in the space. Include your
If y	ou or your non-filing	spouse have r		er, combine the inf	ormation f	or all employe	ers for that person on the lines below. If
					For	r Debtor 1	For Debtor 2 or non-filing spouse
2.			ary, and commissions nonthly, calculate what		2	\$4,728.53	
3.	Estimate and list	monthly overt	time pay.		3. + _	\$0.00	<u> </u>
4.	Calculate gross i	ncome. Add I	ine 2 + line 3.		4.	\$4,728.53	

Official Form 106l Schedule I: Your Income page 1

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Deb	otor 1 Mark A. Lipscomb		Case nur	nber (if know	'n)	
			For Debtor 1	For Debto		
	Copy line 4 here	→ 4.	\$4,728.53			•
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$880.45			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$736.67			
	5f. Domestic support obligations	5f.	\$0.00			
	5g. Union dues	5g.	\$0.00			
	5h. Other deductions. Specify:	5h.•	+\$0.00			
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	+ 6.	\$1,617.12			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	4. 7.	<u>\$3,111.41</u>			
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$0.00			
	8f. Other government assistance that you regularly receive					
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	 8g.	\$0.00			
	8h. Other monthly income.					
	Specify: Part-time job	8h. .	+\$350.00			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	n. 9.	\$350.00			
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10. e.	\$3,461.41	+]=	\$3,461.41
11.	State all other regular contributions to the expenses that you list in	Sched	ule J.			
	Include contributions from an unmarried partner, members of your hous friends or relatives.			ir roommates	, and othe	er
	Do not include any amounts already included in lines 2-10 or amounts t	that are i	not available to pay	expenses list	ed in Sche	
	Specify:				_ 11. +	÷
12.	Add the amount in the last column of line 10 to the amount in line 1 income. Write that amount on the Summary of Your Assets and Liabilit				12.	\$3,461.41
12	if it applies. Do you expect an increase or decrease within the year after you file	a this fo	ırm?			Combined monthly income
	✓ No. None.					
	Yes. Explain:					

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G	ill in this inforn	nation to ident	ify your case:			Oh.	:£ 41=:-		
	Debtor 1	Mark	A.	Lipsco	omb	l	ck if this	s is: ended filing	
	Debior 1	First Name	Middle Name	Last Nam		님		lement showing	postpetition
	Debtor 2	First Name	Middle Nove	Loot Nov				r 13 expenses a ng date:	s of the
	(Spouse, if filing)	First Name	Middle Name	Last Nam				.g aato.	
	United States Bank	ruptcy Court for the	e: <u>NORTHERN D</u>	DISTRICT OF	ILLINOIS		MM / D	D / YYYY	
	Case number (if known)								
O	fficial Form 10)6 <u>J</u>				-			
S	chedule J: Yo	our Expense	es						12/15
nai	rrect information. I me and case numb	f more space is n	eeded, attach anot swer every questio	her sheet to th	ng together, both ar iis form. On the top				
1.	Is this a joint cas	e?							
2.	Do you have dep Do not list Debtor Debtor 2. Do not state the d names. Do your expense expenses of peop	Debtor 2 live in a set of sendents? 1 and ependents' es include ple other than	ile Official Form 106 No Yes. Fill out this if for each dependent No No Yes	J-2, Expenses	for Separate Housel Dependent's relation Debtor 1 or Debtor	onshi		2. Dependent's age	Does dependent live with you? No Yes Yes
	yourself and you	r dependents?							
F	Part 2: Estima	ate Your Ongo	ing Monthly Ex	penses					
to		of a date after th		-	e using this form as supplemental Sched			-	
			sh government assi on Schedule I: Your					Your expens	ses
4.			penses for your residence and rent for the gro					4.	\$800.00
	If not included in	line 4:							
	4a. Real estate t	axes						4a	
	4b. Property, hor	neowner's, or rente	er's insurance					4b	
	4c. Home mainte	enance, repair, and	l upkeep expenses					4c	
	4d. Homeowner's	s association or co	ndominium dues					4d.	

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Debtor 1 Mark A. Lipscomb	Case number (if known)	
	Your expe	nses
5. Additional mortgage payments for your residence, such as home ed	quity loans 5	
6. Utilities:		
6a. Electricity, heat, natural gas	6a	\$200.00
6b. Water, sewer, garbage collection	6b	
 Telephone, cell phone, Internet, satellite, and cable services 	6c	\$140.00
6d. Other. Specify: cell phone	6d	\$120.00
7. Food and housekeeping supplies	7.	\$350.00
8. Childcare and children's education costs	8.	
9. Clothing, laundry, and dry cleaning	9.	\$175.00
10. Personal care products and services	10.	\$30.00
11. Medical and dental expenses	11.	\$50.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$160.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$60.00
14. Charitable contributions and religious donations	14.	
15. Insurance. Do not include insurance deducted from your pay or included in lines 4	or 20.	
15a. Life insurance	15a	
15b. Health insurance	15b.	
15c. Vehicle insurance	15c	\$270.00
15d. Other insurance. Specify:	15d	
16. Taxes. Do not include taxes deducted from your pay or included in line. Specify:	nes 4 or 20 16	
17. Installment or lease payments:		
17a. Car payments for Vehicle 1 payment on car leased in mo	ther 's name 17a.	\$605.00
17b. Car payments for Vehicle 2	17b	
17c. Other. Specify:	17c	
17d. Other. Specify:		
18. Your payments of alimony, maintenance, and support that you did deducted from your pay on line 5, Schedule I, Your Income (Official		
19. Other payments you make to support others who do not live with y Specify:	ou. 19	

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Deb	tor 1	Mark A. Lipscomb	Case number (if known)			
		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.				
	20a.	Mortgages on other property	20a.			
	20b.	Real estate taxes	20b			
	20c.	Property, homeowner's, or renter's insurance	20c.			
	20d.	Maintenance, repair, and upkeep expenses	20d.			
	20e.	Homeowner's association or condominium dues	20e.			
21.	Other	. Specify:	21.			
22.	Calcu	late your monthly expenses.				
	22a.	Add lines 4 through 21.	22a	\$2,960.00		
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2. 22b			
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$2,960.00		
23.	Calcu	late your monthly net income.				
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$3,461.41		
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$2,960.00		
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$501.41		
24.	Do yo	ou expect an increase or decrease in your expenses within the year after y	ou file this form?			
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?					
	1	No.				
	□ `	Yes. Explain here: None.				
		None.				

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Fill in this inf							
Debtor 1	Mark First Name	A. Middle Name	Lipscomb Last Name				
Debtor 2 (Spouse, if filing)		Middle Name	Last Name				
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							
Case number (if known)					Check if this		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$820.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$820.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$840.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$43,773.77
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$37,298.38
	Your total liabilities	\$81,912.15
Р	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,461.41
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2,960.00

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Debtor	1 Mark A. Lipscomb Cas	e number (if known)			
Part	4: Answer These Questions for Administrative and Statistical	Records			
6. Aı	e you filing for bankruptcy under Chapters 7, 11, or 13?				
	No. You have nothing to report on this part of the form. Check this box and submi	t this form to the court with your other schedules.			
7. W	nat kind of debt do you have?				
√	Your debts are primarily consumer debts. Consumer debts are those "incurred family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical				
	Your debts are not primarily consumer debts. You have nothing to report on thi this form to the court with your other schedules.	s part of the form. Check this box and submit			
	. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$4,515.				
9. Co	ppy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i>	:			
		Total claim			
Fr	om Part 4 on <i>Schedule E/F,</i> copy the following:				
9a	. Domestic support obligations. (Copy line 6a.)	\$21,000.00			
9b	. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$19,083.77			
90	. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00			
90	. Student loans. (Copy line 6f.)	\$0.00			

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$40,083.77

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		DOC	cument Page 45 (01 83		
Fill in this info	ormation to i	dentify your case	:			
Debtor 1	Mark First Name	A. Middle Name	Lipscomb Last Name			
Debtor 2	T ilot Hamo	Middle Harris	Eddi Namo			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS			
Case number (if known)					Check if this is an amended filing	
Official Form	106Dec					
Declaration	About an I	ndividual Debt	or's Schedules			12/15
If two married peo	pple are filing to	gether, both are equa	lly responsible for supplying	correct information.		
concealing proper	rty, or obtaining	money or property by	chedules or amended sched y fraud in connection with a l 18 U.S.C. §§ 152, 1341, 1519,	bankruptcy case can re	•	
Sig	n Below					
Did you pay o	or agree to pay	someone who is NOT	an attorney to help you fill o	ut bankruptcy forms?		

$\overline{\mathbf{V}}$	No		
	Yes.	Name of person	Attach Bankruptcy Petition Preparer's Notice,
			Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X	/s/ Mark A. Lipscomb	X		
	Mark A. Lipscomb, Debtor 1	Signature of Debtor 2		
	Date <u>05/21/2018</u> MM / DD / YYYY	Date MM / DD / YYYY		

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				-	
Fill in this in	formation to	identify your case		4	
Debtor 1	Mark	A.	Lipscomb		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing	j) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	
Official Forn	n 107				
Statement of	of Financia	I Affairs for Ind	ividuals Filing for B	ankruptcy	04/
Part 1: Gi	ive Details Ab	out Your Marital S	Status and Where You Li	ived Before	
1. What is you	r current marital	status?			
☐ Married	i ourrent martar	otatuo.			
✓ Not mari	ried				
— 2. During the l	ast 3 vears, have	vou lived anywhere o	ther than where you live now	ı?	
√ No	, ,	,			
	t all of the places	you lived in the last 3 y	ears. Do not include where you	u live now.	
3. Within the la	ast 8 years, did y	ou ever live with a spo	ouse or legal equivalent in a c	community property state or territory?	
,	property states as and Wisconsin.)	nd territories include Ar	zona, California, Idaho, Louisia	ana, Nevada, New Mexico, Puerto Rico, Texas,	
√ No					
Yes. Ma	ike sure you fill o	ut Schedule H: Your Co	debtors (Official Form 106H).		

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Deb	tor 1	Mark A. Lipscomb	mber (if known)							
Pa	Part 2: Explain the Sources of Your Income									
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.									
	_	□ No ☑ Yes. Fill in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions				
		ary 1 of the current year until u filed for bankruptcy:		\$17,736.80	Wages, commissions, bonuses, tips					
			Operating a business		Operating a business					
		calendar year:	Wages, commissions, bonuses, tips	\$54,067.00	Wages, commissions, bonuses, tips					
(Jan	uary 1 to	o December 31, <u>2017</u>)	Operating a business		Operating a business					
For	the cale	endar year before that:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips					
(Jan	uary 1 to	o December 31, <u>2016</u>)	Operating a business		Operating a business					
5.	Include unemp	u receive any other income during income regardless of whether that i loyment; and other public benefit pambling and lottery winnings. If you a 1.	ncome is taxable. Examplyments; pensions; rental in	les of other income are accome; interest; dividend	ds; money collected from la	awsuits; royalties;				
	List ea	ch source and the gross income from	n each source separately.	Do not include income	that you listed in line 4.					
	□ No ✓ Ye	s. Fill in the details.								
			Debtor 1		Debtor 2					
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions				
		ary 1 of the current year until u filed for bankruptcy:								
For the last calendar year:		calendar year:								
(Jan	uary 1 t	o December 31, 2017)								
		endar year before that:								
(Jan	uary 1 to	o December 31, <u>2016</u>)								

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Del	otor 1	Mark A. Lipscomb Case number (if known)							
P	art 3:	List Certain Payments You Made Before You Filed for Bankruptcy							
6.	Are eithe	er Debtor 1's or Debtor 2's debts primarily consumer debts?							
No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."									
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?							
		□ No. Go to line 7.							
		Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
		* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.							
	✓ Yes.	Debtor 1 or Debtor 2 or both have primarily consumer debts.							
		During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?							
		✓ No. Go to line 7.							
		Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
7.	Insiders corporati agent, in	year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; ons of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing cluding one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations child support and alimony.							
	✓ No ☐ Yes.	List all payments to an insider.							
8.		year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that d an insider?							
	Include p	ayments on debts guaranteed or cosigned by an insider.							
	✓ No ☐ Yes.	List all payments that benefited an insider.							

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Debtor 1		Mark A. Lipscomb	Case number (if known)						
P	art 4:	Identify Legal Actions, Repossessions, and Foreclosures							
9.	List all s	I year before you filed for bankruptcy, were you a party in any lawsuituch matters, including personal injury cases, small claims actions, divorcations, and contract disputes.							
	✓ No ☐ Yes	No Yes. Fill in the details.							
10.	seized,	I year before you filed for bankruptcy, was any of your property repo or levied? Ill that apply and fill in the details below.	ssessed, foreclosed, garnished, attached,						
		Go to line 11. Fill in the information below.							
11.		00 days before you filed for bankruptcy, did any creditor, including a s from your accounts or refuse to make a payment because you owe	the contract of the contract o						
	✓ No ☐ Yes	. Fill in the details.							
12.		l year before you filed for bankruptcy, was any of your property in thes, a court-appointed receiver, a custodian, or another official?	e possession of an assignee for the benefit of						
	✓ No ☐ Yes								
Pa	art 5:	List Certain Gifts and Contributions							
13.	Within 2	2 years before you filed for bankruptcy, did you give any gifts with a t	total value of more than \$600 per person?						
	✓ No ☐ Yes	. Fill in the details for each gift.							
14.	Within 2 to any o	2 years before you filed for bankruptcy, did you give any gifts or cont charity?	ributions with a total value of more than \$600						
	✓ No ☐ Yes	. Fill in the details for each gift or contribution.							
Pa	art 6:	List Certain Losses							
15.		l year before you filed for bankruptcy or since you filed for bankrupto saster, or gambling?	cy, did you lose anything because of theft, fire,						
	✓ No ☐ Yes	. Fill in the details.							

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Debtor 1 Mark A. Lipscomb			nb	Case number (if known)				
Part 7:	List Cer	tain P	ayments o	r Transfers				
anyon Include □ No	ne you consul e any attorney	I ted abo	out seeking ba	uptcy, did you or anyone else acting on you ankruptcy or preparing a bankruptcy petition preparers, or credit counseling agencies for se	n?		-	
CC Advisi				Description and value of any property tra Credit Counseling	or	ate payment transfer was ade	Amount of payment	
Number S	Street			_	<u>. I</u>	May 15, 2017	\$10.00	
City		State	ZIP Code	_				
Email or webs	site address			_				
Person Who	Made the Paymo	ent, if Not	You	_				
Robert J. Adams & Associates Person Who Was Paid			tes	Description and value of any property transferred Down payment for Chapter 13		ate payment transfer was ade	Amount of payment	
901 W. Ja Number S	ickson, Ste. Street	202		_	<u>. 1</u>	May 17, 2018	\$310.00	
Chicago City		IL State	60607 ZIP Code	- -	_			
Email or webs	site address			_				
Person Who	Made the Payme	ent, if Not	You	_				
	-	-		uptcy, did you or anyone else acting on you with your creditors or to make payments to		ansfer any prop	perty to	
Do not	t include any p	ayment	or transfer tha	at you listed on line 16.				
✓ No	o es. Fill in the	details.						

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Deb	tor 1	Mark A. Lipscomb	Case number (if known)
18.		2 years before you filed for bankruptcy, did you sell, trade, or otherwis by transferred in the ordinary course of your business or financial affair	
		both outright transfers and transfers made as security (such as granting of include gifts and transfers that you have already listed on this statement.	a security interest or mortgage on your property).
	✓ No	s. Fill in the details.	
19.	you are	10 years before you filed for bankruptcy, did you transfer any property e a beneficiary? (These are often called asset-protection devices.)	to a self-settled trust or similar device of which
	✓ No	s. Fill in the details.	
P	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	osit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or i , closed, sold, moved, or transferred?	nstruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.	of deposit; shares in banks, credit unions, brokerage
	✓ No ☐ Yes	s. Fill in the details.	
21.	•	now have, or did you have within 1 year before you filed for bankruptourities, cash, or other valuables?	y, any safe deposit box or other depository
	✓ No ☐ Yes	s. Fill in the details.	
22.	•	ou stored property in a storage unit or place other than your home with	in 1 year before you filed for bankruptcy?
	✓ No	s. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Else	
23.	•	hold or control any property that someone else owns? Include any prin trust for someone.	operty you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	

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Del	otor 1		Mark A. Lipscomb	Case number (if known)						
Р	art 10) :	Give Details About Environmental Information							
For	the pu	urpo	ose of Part 10, the following definitions apply:							
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.									
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.									
	 Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item. 									
Rej	port all	l no	tices, releases, and proceedings that you know about, regardless of	when they occurred.						
24.	Has a	•	governmental unit notified you that you may be liable or potentially	liable under or in violation of an environmental						
	سنا	√o ∕es.	Fill in the details.							
25.		-	u notified any governmental unit of any release of hazardous materia	al?						
	بخا	√o ∕es.	Fill in the details.							
26.	Have orde	-	u been a party in any judicial or administrative proceeding under any	environmental law? Include settlements and						
		√o √es.	Fill in the details.							
P	art 11	1:	Give Details About Your Business or Connections to A	ny Business						
27.	Withi busii		years before you filed for bankruptcy, did you own a business or has?	ve any of the following connections to any						
			A sole proprietor or self-employed in a trade, profession, or other activity A member of a limited liability company (LLC) or limited liability partners! A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation	nip (LLP)						
	7		None of the above applies. Go to Part 12. Check all that apply above and fill in the details below for each business.	S.						
28.			years before you filed for bankruptcy, did you give a financial stater cial institutions, creditors, or other parties.	nent to anyone about your business? Include						
	_	√lo Ves.	Fill in the details below.							

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Debtor 1	otor 1 Mark A. Lipscomb		Case number (if known)
Part 12	: Sign Below		
that answer	ers are true and correct. I under	rstand that making a false statemen nkruptcy case can result in fines up	ments, and I declare under penalty of perjury t, concealing property, or obtaining money or to \$250,000, or imprisonment for up to 20 years,
X /s/ Mai	rk A. Lipscomb	X	
Mark A.	. Lipscomb, Debtor 1	Signature of Debtor 2	
Date _	05/21/2018	Date	
Did you at	tach additional pages to Your S	tatement of Financial Affairs for Indi	ividuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes			
Did you pa	ay or agree to pay someone who	is not an attorney to help you fill o	ut bankruptcy forms?
√ No			
Yes. N	Name of person		Attach the Bankruptcy Petition Preparer's Notice,

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
-	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Ba$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

ın	re Mark A. Lipscomb	Case No	·
		Chapter	13
	DISCLOSURE OF COMPENSATION	OF ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I ce that compensation paid to me within one year before the filing of services rendered or to be rendered on behalf of the debtor(s) ir is as follows:	the petition in bankruptcy, c	or agreed to be paid to me, for
	For legal services, I have agreed to accept		\$4,000.00
	Prior to the filing of this statement I have received		\$310.00
	Balance Due		\$3,690.00
2.	The source of the compensation paid to me was: Debtor Other (specify)		
3.	The source of compensation to be paid to me is:		
	☑ Debtor ☐ Other (specify)		
4.	✓ I have not agreed to share the above-disclosed compensation associates of my law firm.	ion with any other person un	less they are members and
	☐ I have agreed to share the above-disclosed compensation vassociates of my law firm. A copy of the agreement, togethe compensation, is attached.	·	
5.	In return for the above-disclosed fee, I have agreed to render leg	gal service for all aspects of	the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering adv bankruptcy;	ice to the debtor in determin	ing whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of	of affairs and plan which mag	y be required;
	c. Representation of the debtor at the meeting of creditors and of	confirmation hearing, and ar	ny adjourned hearings thereof;

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/21/2018 /s/ Robert J. Adams & Associates

Date

Robert J. Adams & Associates
Robert J Adams & Associates
901 W Jackson Suite 202

Chicago, IL 60607

Bar No. 0013056

Phone: (312) 346-0100 / Fax: (312) 346-6228

/s/ Mark A. Lipscomb

Mark A. Lipscomb

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Mark A. Lipscomb CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

	The above	e named De	ebtor hereb	y verifies t	that the	attached	list of	creditors	is true	and corr	ect to	the b	est of	his/her
knov	vledge.													

Date <u>5/21/2018</u>	s	Signature <i>M</i>	/s/ Mark A. Lipscomb Mark A. Lipscomb	
Date	s	Signature _		

AFNI 1310 Martin Luther King Drv P.O.Box 3517 Bloomington, IL 61702-3517

Americash Loans 7454 S. Cicero Bedford Park, IL 60629

Attorney General for Illinois Healthcare and Family Services MRU 160 N. LaSalle St. Chicago, IL 60601-3103

Bankcard Services PO box 4477 Columbus, GA 31902

Carson Pirie Scott Retail Services PO Box 15521 Wilimington, DE 19850-5521

CEP America- Illinois, P.C P.O Box 582663 Ste D-11 Modesto, CA 95358-0046

City of Chicago 121 N. Lasalle Chicago, IL 60602

Comcast PO Box 3002 Southeastern, PA 19398

Comenity Bank/Carsons 3100 Easton Square Columbus, OH 43219 Creditone Bank PO Box 60500 City of Industry, CA 91716-0500

Dane County Circuit Clerk 215 S Hamilton Street Maidson, WI 53703

Dept. of Justice\ Tax Division P.O.Box 55 Washington, DC 20044

Dupage County 505 N. County Rd. Wheaton, IL 60187

First Premier Bank P.O.Box 5519 Sioux Falls, SD 57117-5519

Game stop Trident Asset Management 53 Perimeter Ctr. E Ste 4 Atlanta, GA 30346

Global Payments Check Services 6215 W. Howard St. Niles, IL 60714

Harris & Harris, LTD P.O.Box 5598 Chicago, IL 60680-5598

Home Depot/Citibank PO Box 6497 Sioux Falls, SD 57117 Illinois Department of Employment Securi 33 S. State Chicago, IL 60603

Illinois Department of Healthcare and P.O.B ox 641097 Chicago, IL 60664

Illinois Dept. of Healthcare and Family P.O. Box 5400 Carol Stream, IL 60197-5400

Illinois State Tollway 2700 Ogden Ave Downers Grove, IL 60515

IRS
P.O Box 7346
Philadelphia, PA 19101-7346

IRS PO Box 21126 Philadelphia, PA 19114

IRS Assoc. Area Counsel, SB/SE 200 W. Adams, Ste. 2300 Chicago, IL 60606-5208

J B Jenkins & Associates 1253 Paysphere Circle Chicago,IL 60674

Jewel Food Stores P.O.Box 1488 Melrose Park, IL 60160 KCA Financial Services 628 North St. Geneva, IL 60134

Liou Law Firm 575 W. Madison, Suite 361 Chicago, IL 60661

Peoples Energy 200 E. Randolph Dr. Chicago, IL 60687-6207

Portfolio Recovery 120 Corporate Blvd., Ste. 1 Norfolk, VA 23502

Precision Recover Analytics C/O Asset Recovery Solution 2200 E Devon Suite 200 Des Plaines, IL 60018

Robert J Adams & Associates 901 W Jackson, Suite 202 Chicago, IL 60607

SKO Brenner American, Inc. 40 Daniel St. PO Box 230 Farmingdale, NY 11735

Speedy cash 3611 N Ridge Rd Wichita, KS 67205-1214

St. Mary Medical Center PO Box 3603 Munster, IN 46321-0757

T-Mobile PO Box 37380 Albuquerque, NM 87176

TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521

US Attorney, Civil Division 219 S. Dearborn Chicago, IL 60604

Verizon PO Box 33056 Saint Petersburg, FL 33733

Village Imaging Professionals, LLC 9410 Compubil Drive Orland Park, IL 60462

WILL COUNTY 14 W Jefferson Joiliet, IL 60436

WOW! Internet and Cable PO Box 5715 Carol Stream, IL 60197

Xfinity 2001 York Rd Oak Brook, IL 60523-1812

Yolanda Wilson Lipscomb c/o IL State Disbursement Unit PO Box 5400 Carol Stream, IL 60197-5400 Yolanda Wilson Lipscomb 8920 S. Ada Chicago, IL 60620 Case 18-14711 Doc 1 Filed 05/21/18 Entered 05/21/18 16:06:36 Desc Main Document Page 67 of 83

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Mark A. Lipscomb CASE NO

Debtor

SOCIAL SECURITY NO. xxx-xx-5135

CHAPTER 13

ORDER TO EMPLOYER TO PAY THE TRUSTEE

UPON REPRESENTATIONS OF THE TRUSTEE, OR OTHER INTERESTED PARTIES, THE COURT FINDS THAT:

The above named debtor has pending in this Court a case for adjustment of debts by an individual with regular income under the provisions of Chapter 13 of Title 11 U.S.C. and pursuant to the provisions of said statute and of the debtor's plan, the debtor has submitted all of such portion of the debtor's future earnings or other future income to the supervision and control of the trustee of this Court as may be necessary for the execution of the debtor's plan; and

That under the provisions of Title 11 U.S.C., this Court has exclusive jurisdiction of all property including the earnings from such services performed by the debtor during the pendency of this case pursuant to 11 U.S.C. § 1325(b) any entity from whom the debtor receives income shall pay all or any part of such income to the trustee as may be ordered by this Court. A portion of the debtor's earnings are necessary for the execution of the debtor's plan.

NOW, THEREFORE, IT IS ORDERED that until further order of this Court or until notice that this case has been dismissed or converted to Chapter 7 of the Bankruptcy Code is received, the employer of said debtor

Aramark Services, Inc 1101 Market Street Philadelphia, PA 19107

shall deduct from the earnings of the debtor the sum of	\$390.00 bi-weekiy
period for which the debtor receives periodic or lump sum payr	and deduct a similar amount for each pay period thereafter, including any nent for or on account of vacation, termination or other benefits arising all remit forthwith the sums so deducted to the trustee appointed here or
IT IS FURTHER ORDERED, that said employer notify sa for such termination.	id trustee if the employment of said debtor is terminated and the reason
provisions of any laws of the United States, the laws of any star	of the debtor, except the amounts required to be withheld by the e or political subdivision, or by an insurance pension or union dues of this Court be paid to the aforesaid debtor in accordance with employer's
IT IS FURTHER ORDERED, that no deductions for acconot specifically authorized by this Court be made from the earn	unt of any garnishment, wage assignment, credit union or other purpose ings of the debtor.
IT IS FURTHER ORDERED, that this order supersedes a cause.	any and all previous orders, if any, made to the subject employer in this
Date	

United States Bankruptcy Judge

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AFNI 1310 Martin Luther King Drv P.O.Box 3517 Bloomington, IL 61702-3517

215 S Hamilton Street Maidson, WI 53703

Dane County Circuit Clerk Illinois Dept. of Healthcare and P.O. Box 5400 Carol Stream, IL 60197-5400

Americash Loans 7454 S. Cicero Bedford Park, IL 60629

Dept. of Justice\ Tax Division Illinois State Tollway P.O.Box 55 Washington, DC 20044 Downers Grove, IL 60515

2700 Ogden Ave

IRS

IRS

Attorney General for Illinois Dupage County Healthcare and Family Services | 505 N. County Rd. 160 N. LaSalle St. Chicago, IL 60601-3103

Wheaton, IL 60187

P.O Box 7346 Philadelphia, PA 19101-7346

Bankcard Services PO box 4477 Columbus, GA 31902

First Premier Bank P.O.Box 5519 Sioux Falls, SD 57117-5519

PO Box 21126 Philadelphia, PA 19114

Carson Pirie Scott Retail Services PO Box 15521 Wilimington, DE 19850-5521

Game stop Trident Asset Management 200 W. Adams, Ste. 2300 53 Perimeter Ctr. E Ste 4 Chicago, IL 60606-5208 Atlanta, GA 30346

IRS Assoc. Area Counsel, SB/SE 200 W. Adams, Ste. 2300

CEP America- Illinois, P.C P.O Box 582663 Ste D-11 Modesto, CA 95358-0046

Global Payments Check Services J B Jenkins & Associates 6215 W. Howard St. Niles, IL 60714

1253 Paysphere Circle Chicago, IL 60674

City of Chicago 121 N. Lasalle Chicago, IL 60602

Harris & Harris, LTD P.O.Box 5598 Chicago, IL 60680-5598 Jewel Food Stores P.O.Box 1488 Melrose Park, IL 60160

Comcast PO Box 3002 Southeastern, PA 19398 Home Depot/Citibank PO Box 6497 Sioux Falls, SD 57117

KCA Financial Services 628 North St. Geneva, IL 60134

Comenity Bank/Carsons 3100 Easton Square Columbus, OH 43219 Illinois Department of Employme: Liou Law Firm 33 S. State Chicago, IL 60603 Chicago, IL 60661

575 W. Madison, Suite 361

Creditone Bank PO Box 60500 City of Industry, CA 91716-0500 Chicago, IL 60664

Illinois Department of Healthca Peoples Energy P.O.B ox 641097

200 E. Randolph Dr. Chicago, IL 60687-6207

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Portfolio Recovery 120 Corporate Blvd., Ste. 1 Norfolk, VA 23502 Village Imaging Professionals, : 9410 Compubill Drive Orland Park, IL 60462

Precision Recover Analytics C/O Asset Recovery Solution 2200 E Devon Suite 200 Des Plaines, IL 60018 WILL COUNTY 14 W Jefferson Joiliet, IL 60436

Robert J Adams & Associates 901 W Jackson, Suite 202 Chicago, IL 60607 WOW! Internet and Cable PO Box 5715
Carol Stream, IL 60197

SKO Brenner American, Inc. 40 Daniel St. PO Box 230 Farmingdale, NY 11735 Xfinity 2001 York Rd Oak Brook, IL 60523-1812

Speedy cash 3611 N Ridge Rd Wichita, KS 67205-1214 Yolanda Wilson Lipscomb c/o IL State Disbursement Unit PO Box 5400 Carol Stream, IL 60197-5400

St. Mary Medical Center PO Box 3603 Munster, IN 46321-0757

Yolanda Wilson Lipscomb 8920 S. Ada Chicago, IL 60620

T-Mobile PO Box 37380 Albuquerque, NM 87176

TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521

US Attorney, Civil Division 219 S. Dearborn Chicago, IL 60604

Verizon PO Box 33056 Saint Petersburg, FL 33733

IN RE: Mark A. Lipscomb CASE NO

CHAPTER 13

Scheme Selected: State

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$140.00	\$0.00	\$140.00	\$140.00	\$0.00
7.	Electronics	\$440.00	\$0.00	\$440.00	\$440.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$200.00	\$0.00	\$200.00	\$200.00	\$0.00
12.	Jewelry	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13.	Non-farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Unlisted pers. and household itemsincl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	\$40.00	\$0.00	\$40.00	\$40.00	\$0.00
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

IN RE: Mark A. Lipscomb CASE NO

CHAPTER 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

TOTALS:

		Gross	Total	Total	Total Total Amount		
No.	Category	Property Value	Encumbrances	Equity	Exempt	Total Amount Non-Exempt	
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
9.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
0.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
1.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
12.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
3.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
4.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
7.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
8.	Cropseither growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
19.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
	TOTAL C.	*****	*		*		

\$820.00

\$0.00

\$820.00

\$820.00

\$0.00

IN RE: Mark A. Lipscomb CASE NO

CHAPTER 13

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description		Market Value	Lien	Equity
Real Property (None)				_
Personal Property (None)				
TOTALS:		\$0.00	\$0.00	\$0.00
Non-Exempt Property by Item: The following property, or a portion thereof, is non-exempt.				
Property Description	Market Value	Lien	Equity Non-Exe	mpt Amount
Real Property (None) Personal Property				
(None) TOTALS:	\$0.00	\$0.00	\$0.00	\$0.00

Summary				
A. Gross Property Value (not including surrendered property)	\$820.00			
B. Gross Property Value of Surrendered Property	\$0.00			
C. Total Gross Property Value (A+B)	\$820.00			
D. Gross Amount of Encumbrances (not including surrendered property)	\$0.00			
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00			
F. Total Gross Encumbrances (D+E)	\$0.00			
G. Total Equity (not including surrendered property) / (A-D)	\$820.00			
H. Total Equity in surrendered items (B-E)	\$0.00			
I. Total Equity (C-F)	\$820.00			
J. Total Exemptions Claimed	\$820.00			
K. Total Non-Exempt Property Remaining (G-J)	\$0.00			

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AFNI Dane County Circuit Clerk Illinois Dept. of Healthcare 215 S Hamilton Street 1310 Martin Luther King Drv and Family Maidson, WI 53703 P.O.Box 3517 P.O. Box 5400 Bloomington, IL 61702-3517 Carol Stream, IL 60197-5400 Dept. of Justice\ Tax Division Illinois State Tollway Americash Loans 7454 S. Cicero P.O.Box 55 2700 Ogden Ave Washington, DC 20044 Downers Grove, IL 60515 Bedford Park, IL 60629 Attorney General for Illinois Dupage County IRS Healthcare and Family Services 505 N. County Rd.
MRU Wheaton, IL 60187 P.O Box 7346 Philadelphia, PA 19101-7346 160 N. LaSalle St. Chicago, IL 60601-3103 First Premier Bank P.O.Box 5519 Bankcard Services IRS PO box 4477 PO Box 21126 Columbus, GA 31902 Sioux Falls, SD 57117-5519 Philadelphia, PA 19114 Carson Pirie Scott Game stop IRS Assoc. Area Counsel,
Trident Asset Management 200 W. Adams, Ste. 2300
53 Perimeter Ctr. E Ste 4 Chicago, IL 60606-5208 IRS Assoc. Area Counsel, SB/SE Game stop Retail Services PO Box 15521 Wilimington, DE 19850-5521 Atlanta, GA 30346 CEP America- Illinois, P.C Global Payments Check Services J B Jenkins & Associates P.O Box 582663 Ste D-11 6215 W. Howard St. Modesto, CA 95358-0046 Niles, IL 60714 6215 W. Howard St. 1253 Paysphere Circle Chicago, IL 60674 City of Chicago Harris & Harris, LTD P.O.Box 5598 Jewel Food Stores 121 N. Lasalle P.O.Box 1488 Chicago, IL 60602 Chicago, IL 60680-5598 Melrose Park, IL 60160 Comcast Home Depot/Citibank KCA Financial Services PO Box 3002 PO Box 6497 628 North St. Southeastern, PA 19398 Geneva, IL 60134 Sioux Falls, SD 57117 Liou Law Firm Comenity Bank/Carsons 3100 Easton Square Columbus, OH 43219 Illinois Department of Employment Securi 575 W. Madison, Suite 361 33 S. State Chicago, IL 60661 Chicago, IL 60603 Creditone Bank Illinois Department of Peoples Energy PO Box 60500 Healthcare and City of Industry, CA 91716- P.O.B ox 641097

Chicago, IL 60664

0500

200 E. Randolph Dr. Chicago, IL 60687-6207

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Portfolio Recovery 120 Corporate Blvd., Ste. 1 Norfolk, VA 23502

Village Imaging Professionals, LLC 9410 Compubill Drive Orland Park, IL 60462

Precision Recover Analytics WILL COUNTY C/O Asset Recovery Solution 14 W Jefferson 2200 E Devon Suite 200 Des Plaines, IL 60018

Joiliet, IL 60436

Robert J Adams & Associates WOW! Internet and Cable 901 W Jackson, Suite 202 PO Box 5715 Chicago, IL 60607

Carol Stream, IL 60197

SKO Brenner American, Inc. 40 Daniel St. PO Box 230 Farmingdale, NY 11735

Xfinity 2001 York Rd Oak Brook, IL 60523-1812

Speedy cash 3611 N Ridge Rd Wichita, KS 67205-1214

Yolanda Wilson Lipscomb c/o IL State Disbursement Unit PO Box 5400 Carol Stream, IL 60197-5400

St. Mary Medical Center PO Box 3603 Munster, IN 46321-0757 Yolanda Wilson Lipscomb 8920 S. Ada Chicago, IL 60620

T-Mobile PO Box 37380 Albuquerque, NM 87176

TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521

US Attorney, Civil Division 219 S. Dearborn Chicago, IL 60604

Verizon PO Box 33056 Saint Petersburg, FL 33733 Case 18-14711 Doc 1 Filed 05/21/18 Entered 05/21/18 16:06:36 Desc Main Document Page 75 of 83

Robert J. Adams & Associates, Bar No. 0013056 Robert J Adams & Associates 901 W Jackson Suite 202 Chicago, IL 60607 (312) 346-0100 Attorney for the Petitioner

UNITED STATES BANKRUPTCY COURT FOR THE

NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

In re:	Case No.:
Mark A. Lipscomb	SSN: xxx-xx-5135
	SSN:
Debtor(s)	Numbered Listing of Creditors

Address: **717 E. 89th Place**

Chapter: 13

Chicago, IL 60619

	Creditor name and mailing address	Category of claim	Amount of claim
1.	AFNI 1310 Martin Luther King Drv P.O.Box 3517 Bloomington, IL 61702-3517	Unsecured Claim	\$1,194.62
2.	Americash Loans 7454 S. Cicero Bedford Park, IL 60629	Unsecured Claim	\$1,000.00
3.	Attorney General for Illinois Healthcare and Family Services MRU 160 N. LaSalle St. Chicago, IL 60601-3103	Unsecured Claim	\$0.00
4.	Bankcard Services PO box 4477 Columbus, GA 31902	Unsecured Claim	\$2,510.68
5.	Carson Pirie Scott Retail Services PO Box 15521 Wilimington, DE 19850-5521	Unsecured Claim	\$112.00
6.	CEP America- Illinois, P.C P.O Box 582663 Ste D-11 Modesto, CA 95358-0046	Unsecured Claim	\$303.00

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	Debtor	Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim
7.	City of Chicago 121 N. Lasalle Chicago, IL 60602	Unsecured Claim	\$13,000.00
8.	Comcast PO Box 3002 Southeastern, PA 19398	Unsecured Claim	\$876.00
9.	Comenity Bank/Carsons 3100 Easton Square Columbus, OH 43219	Unsecured Claim	\$319.73
10.	Creditone Bank PO Box 60500 City of Industry, CA 91716-0500	Unsecured Claim	\$570.26
11.	Dane County Circuit Clerk 215 S Hamilton Street Maidson, WI 53703	Unsecured Claim	\$470.00
12.	Dept. of Justice\Tax Division P.O.Box 55 Washington, DC 20044	Unsecured Claim	\$0.00
13.	Dupage County 505 N. County Rd. Wheaton, IL 60187	Unsecured Claim	\$300.00
14.	First Premier Bank P.O.Box 5519 Sioux Falls, SD 57117-5519	Unsecured Claim	\$381.00
15.	Game stop Trident Asset Management 53 Perimeter Ctr. E Ste 4 Atlanta, GA 30346	Unsecured Claim	\$75.00

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	Deb	Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim
16.	Global Payments Check Services 6215 W. Howard St. Niles, IL 60714	Unsecured Claim	\$46.00
17.	Harris & Harris, LTD P.O.Box 5598 Chicago, IL 60680-5598	Unsecured Claim	\$661.00
18.	Home Depot/Citibank PO Box 6497 Sioux Falls, SD 57117	Unsecured Claim	\$1,792.00
19.	Illinois Department of Employment Securi 33 S. State Chicago, IL 60603	Unsecured Claim	\$3,181.00
20.	Illinois Department of Healthcare and P.O.B ox 641097 Chicago, IL 60664	Priority Claim	\$0.00
21.	Illinois Dept. of Healthcare and Family P.O. Box 5400 Carol Stream, IL 60197-5400	Unsecured Claim	\$0.00
22.	Illinois State Tollway 2700 Ogden Ave Downers Grove, IL 60515	Unsecured Claim	\$214.00
23.	IRS P.O Box 7346 Philadelphia, PA 19101-7346	Priority Claim	\$19,083.77
24.	IRS P.O Box 7346 Philadelphia, PA 19101-7346	Secured Claim	\$840.00

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	Debtor	Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim
25.	IRS Assoc. Area Counsel, SB/SE 200 W. Adams, Ste. 2300 Chicago, IL 60606-5208	Unsecured Claim	\$0.00
26.	J B Jenkins & Associates 1253 Paysphere Circle Chicago,IL 60674	Unsecured Claim	\$1,010.55
27.	Jewel Food Stores P.O.Box 1488 Melrose Park, IL 60160	Unsecured Claim	\$132.00
28.	KCA Financial Services 628 North St. Geneva, IL 60134	Unsecured Claim	
29.	Liou Law Firm 575 W. Madison, Suite 361 Chicago, IL 60661	Unsecured Claim	\$0.00
30.	Peoples Energy 200 E. Randolph Dr. Chicago, IL 60687-6207	Unsecured Claim	\$188.89
31.	Portfolio Recovery 120 Corporate Blvd., Ste. 1 Norfolk, VA 23502	Unsecured Claim	\$1,000.00
32.	Precision Recover Analytics C/O Asset Recovery Solution 2200 E Devon Suite 200 Des Plaines, IL 60018	Unsecured Claim	\$0.00
33.	Robert J Adams & Associates 901 W Jackson, Suite 202 Chicago, IL 60607	Priority Claim	\$3,690.00

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	Debtor	Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim
34.	SKO Brenner American, Inc. 40 Daniel St. PO Box 230 Farmingdale, NY 11735	Unsecured Claim	\$146.60
35.	Speedy cash 3611 N Ridge Rd Wichita, KS 67205-1214	Unsecured Claim	\$2,161.00
36.	St. Mary Medical Center PO Box 3603 Munster, IN 46321-0757	Unsecured Claim	
37.	T-Mobile PO Box 37380 Albuquerque, NM 87176	Unsecured Claim	\$699.00
38.	TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521	Unsecured Claim	
39.	US Attorney, Civil Division 219 S. Dearborn Chicago, IL 60604	Unsecured Claim	\$0.00
40.	Verizon PO Box 33056 Saint Petersburg, FL 33733	Unsecured Claim	\$2,519.43
41.	Village Imaging Professionals, LLC 9410 Compubill Drive Orland Park, IL 60462	Unsecured Claim	\$0.00
42.	WILL COUNTY 14 W Jefferson Joiliet, IL 60436	Unsecured Claim	\$700.00

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in re:	Mark A. Lipscomb			
	Debtor		Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim	
43.	WOW! Internet and Cable PO Box 5715 Carol Stream, IL 60197	Unsecured Claim		
44.	Xfinity 2001 York Rd Oak Brook, IL 60523-1812	Unsecured Claim	\$1,734.62	
45.	Yolanda Wilson Lipscomb c/o IL State Disbursement Unit PO Box 5400 Carol Stream, IL 60197-5400	Priority Claim	\$21,000.00	
46.	Yolanda Wilson Lipscomb 8920 S. Ada Chicago, IL 60620	Priority Claim	\$0.00	
18 (roperty is a fine of up to \$500,000 or imprison	nment for up to 5 years or both.	
	Mark A. Lipscomb	with the state of	mad Listing of One ditare	
	ned as debtor in this case, declare under penalty of pensity of pensity of6 sheets (including this declaration),		_	
5511	2.2g 2 22.00 (2.00g 02 000.00.00.00),		.,	
I	Debtor: _/s/ Mark A. Lipscomb	Date: 5/21/2018	_	

Mark A. Lipscomb

IN RE: Mark A. Lipscomb CASE NO.

CHAPTER 13

CERTIFICATE OF SERVICE

I, the undersigned, hereby certify that on May 21, 2018, a copy of the attached Chapter 13 Plan, with any attachments, was served on each party in interest listed below, by placing each copy in an envelope properly addressed, postage fully prepaid in compliance with Local Rules.

Date: 5/21/2018 /s/ Robert J. Adams & Associates

Robert J. Adams & Associates

Attorney for the Debtor(s)

AFNI 1310 Martin Luther King Drv P.O.Box 3517 Bloomington, IL 61702-3517 CEP America- Illinois, P.C P.O Box 582663 Ste D-11 Modesto, CA 95358-0046 Dane County Circuit Clerk 215 S Hamilton Street Maidson, WI 53703

Americash Loans 7454 S. Cicero Bedford Park, IL 60629 City of Chicago 121 N. Lasalle Chicago, IL 60602

P.O.Box 55 Washington, DC 20044

Dept. of Justice\ Tax Division

Attorney General for Illinois Healthcare and Family Services MRU 160 N. LaSalle St. Chicago, IL 60601-3103 Comcast PO Box 3002 Southeastern, PA 19398 Dupage County 505 N. County Rd. Wheaton, IL 60187

First Premier Bank

Bankcard Services PO box 4477 Columbus, GA 31902 Comenity Bank/Carsons 3100 Easton Square Columbus, OH 43219

P.O.Box 5519 Sioux Falls, SD 57117-5519

Carson Pirie Scott Retail Services PO Box 15521 Wilimington, DE 19850-5521 Creditone Bank PO Box 60500 City of Industry, CA 91716-0500 Game stop Trident Asset Management 53 Perimeter Ctr. E Ste 4 Atlanta, GA 30346

IN RE: Mark A. Lipscomb CASE NO.

CHAPTER 13

CERTIFICATE OF SERVICE

(Continuation Sheet #1)

	(Continuation Sheet #1)	
Global Payments Check Services	IRS	Mark A. Lipscomb
6215 W. Howard St.	P.O Box 7346	717 E. 89th Place
Niles, IL 60714	Philadelphia, PA 19101-7346	Chicago, IL 60619
Harris & Harris, LTD	IRS	Peoples Energy
P.O.Box 5598	PO Box 21126	200 E. Randolph Dr.
Chicago, IL 60680-5598	Philadelphia, PA 19114	Chicago, IL 60687-6207
Home Depot/Citibank	IRS Assoc. Area Counsel, SB/SE	Portfolio Recovery
PO Box 6497	200 W. Adams, Ste. 2300	120 Corporate Blvd., Ste. 1
Sioux Falls, SD 57117	Chicago, IL 60606-5208	Norfolk, VA 23502
Illinois Department of Employment Securi 33 S. State Chicago, IL 60603	J B Jenkins & Associates 1253 Paysphere Circle Chicago,IL 60674	Precision Recover Analytics C/O Asset Recovery Solution 2200 E Devon Suite 200 Des Plaines, IL 60018
Illinois Department of Healthcare and P.O.B ox 641097 Chicago, IL 60664	Jewel Food Stores P.O.Box 1488 Melrose Park, IL 60160	SKO Brenner American, Inc. 40 Daniel St. PO Box 230 Farmingdale, NY 11735
Illinois Dept. of Healthcare and Family P.O. Box 5400 Carol Stream, IL 60197-5400	KCA Financial Services 628 North St. Geneva, IL 60134	Speedy cash 3611 N Ridge Rd Wichita, KS 67205-1214
Illinois State Tollway	Liou Law Firm	St. Mary Medical Center
2700 Ogden Ave	575 W. Madison, Suite 361	PO Box 3603
Downers Grove, IL 60515	Chicago, IL 60661	Munster, IN 46321-0757

IN RE: Mark A. Lipscomb CASE NO.

CHAPTER 13

CERTIFICATE OF SERVICE

(Continuation Sheet #2)

T-Mobile PO Box 37380

Albuquerque, NM 87176

Xfinity

2001 York Rd

Oak Brook, IL 60523-1812

TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521 Yolanda Wilson Lipscomb c/o IL State Disbursement Unit

PO Box 5400

Carol Stream, IL 60197-5400

US Attorney, Civil Division 219 S. Dearborn Chicago, IL 60604 Yolanda Wilson Lipscomb

8920 S. Ada Chicago, IL 60620

Verizon PO Box 33056 Saint Petersburg, FL 33733

Village Imaging Professionals, LLC 9410 Compubill Drive Orland Park, IL 60462

WILL COUNTY 14 W Jefferson Joiliet, IL 60436

WOW! Internet and Cable PO Box 5715 Carol Stream, IL 60197